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P. 03



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Post Office To Addressee

ORIGIN (POSTAL USE ONLY)				DELIVERY (POSTAL USE ONLY)			
PO ZIP Code 84111	Day of Delivery <input checked="" type="checkbox"/> Next <input type="checkbox"/> Second	Flat Rate Envelope <input type="checkbox"/>	Postage \$13.65	Delivery Attempt Mo. Day Time	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Date In Mo. Day Year 3 1 2004	<input checked="" type="checkbox"/> 12 Noon <input type="checkbox"/> 3 PM	Return Receipt Fee		Delivery Attempt Mo. Day Time	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Time In <input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee		Delivery Date Mo. Day Time	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Weight 11.5 lbs.	Int'l Alpha Country Code	COD Fee	Insurance Fee	<input type="checkbox"/> WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. (With delivery) to be made without obtaining signature of addressee or addressee's agent if delivery employee judges that article can be left in secure location and I authorize that delivery employee's signature constitutes valid proof of delivery.			
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials	Total Postage & Fees \$13.65		NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday			
METHOD OF PAYMENT Business Mail Corporate Account No. X841279				Federal Agency And. No. of Postal Service Acct. No.			
FROM: (PLEASE PRINT) WORKMAN NYDEGGER 60 E SOUTH TEMPLE ST- 1000 EAGLE GATE TOWER SALT LAKE CITY UT 84111-1011 USA				TO: (PLEASE PRINT) MAIL STOP 1111111111 COMMISSIONER OF PATENTS PO BOX 1000 SALT LAKE CITY UT 84111-1000			
FOR PICKUP OR TRACKING CALL 1-800-222-1811 www.usps.com							

TO THE UNITED STATES PATENT AND TRADEMARK OFFICE:
PLEASE CAMP AND RETURN. THANK YOU.

SUBMITTED: Response to Notice to File Missing Parts of Application (3 pgs, in triplicate); Declaration, Power of Attorney and Petition (5 pgs); PTO-1595 Reconciliation Cover Sheet and Assignment (6 pgs); Copy of Notice to File Missing Parts Filing Date Granted (2 pgs); PTO-2038 Credit Card Payment Form in the amount of \$280.00; postcard; and Certificate of Express Mailing Label No. EV 382 939 841 US

Applicant(s): John Chen et al.
For: EPITAXIAL LAYER FOR LASER DIODE RIDGE PROTECTION
Serial No.: 10/670.876
Date Filed: 09/25/2003
Confirmation No.: 5788
Date of Mailing: March 1, 2004
Docket: 15436.247.4.1
Contact: ERIC L. MASCHOFF
(801) 533-9800

